Docket No.: E7900.2052/P2052

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Florian Eisele

Application No.: 10/598,229

Confirmation No.: 1495

Filed: August 22, 2006

Group Art Unit: 3739

For: APPARATUS FOR THE INTERSTITIAL

COAGULATION OF TISSUE

Examiner: n/a

SUBMISSION OF REVOCATION OF PRIOR POWER OF ATTORNEY AND APPOINTMENT OF NEW ATTORNEY AND STATEMENT UNDER 37 CFR 3.73(b)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a Revocation of Prior Power of Attorney and Appointment of New Attorney and Statement Under 37 CFR 3.73(b) in relation to the above-captioned matter. In addition, please change the Attorney Docket Number for all correspondence associated with this patent application to Attorney Docket Number E7900.2052/P2052.

Dated: October 11, 2007

Respectfully submitted,

Gianni Minutoli

Registration No.: 41,198 DICKSTEIN SHAPIRO LLP

1825 Eye Street, NW

Washington, DC 20006-5403

(202) 420-2200

Attorney for Applicant

August 22, 2006 Filed First Named Inventor Florian Eisele **REVOCATION OF** PRIOR POWER OF ATTORNEY APPARATUS FOR THE AND APPOINTMENT OF INTERSTITIAL COAGULATION **NEW ATTORNEY** OF TISSUE Title Group Art Unit 3739 **Examiner Name** n/a E7900.2052/P2052 Attorney Docket No. I hereby revoke all powers of attorney previously granted and hereby appoint: 24998 Practitioners at Customer Number Customer Number Customer Number Bar Code Practitioner(s) named below: Registration Registration Name Number Name Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number 24998 Х Customer Number OR Customer Number Bar Code Gianni Minutoli DICKSTEIN SHAPIRO LLP Individual Name 1825 Eye Street, NW Address 20006-5403 City Washington State DC Zip US Telephone (202) 420-2200 (202) 420-2201 Country I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

forms are submitted.

Name

Signature Date

*Total of

Christian Erbe

forms if more than one signature is required. See below* 1

Application No.

10/598,229